CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

AMENDMENT

(month, day, year)

STATEMENT OF ECONOMIC INTERESTS

COVER PAGE

A Public Document

'dt-	Official	Use Only
	*	**********

MAR 3 0 201

Please type or print in ink.		Human Face
NAME OF FILER (LAST)	(FIRST)	(MIDDLE) / VISION
Smith	Todd	
1. Office, Agency, or Court		
Agency Name		
California Public Employees' Retirement System		
Division, Board, Department, District, if applicable	Your Position	
INVO	Portfolio Man	ager
▶ If filing for multiple positions, list below or on an attachment.		
Agency:	Position:	WIME.
2. Jurisdiction of Office (Check at least one box)		***
▼ State	Judge (Statewide	Jurisdiction)
Multi-County	County of	
☐ City of	☐ Other).
3. Type of Statement (Check at least one box)		
Annual: The period covered is January 1, 2010, through December 3 2010.	_	Date Left
•0I•	(Check one)	overed in January 1, 2010, through the date of
The period covered is/, through December 31 2010.	leaving office	overed is January 1, 2010, through the date of e.
Assuming Office: Date/	The period c of leaving off	overed is, through the date ice.
Candidate: Election Year Office sought, if di	fferent than Part 1:	
4. Schedule Summary		
Check applicable schedules or "None."	Total number of pages in	cluding this cover page:3
Schedule A-1 - Investments – schedule attached	Schedule C - Income,	Loans, & Business Positions - schedule attached
Schedule A-2 - Investments – schedule attached	Schedule D - Income	- Gifts - schedule attached
Schedule B - Real Property – schedule attached	Schedule E - Income	- Gifts - Travel Payments - schedule attached
-or- None - No reportable inter	ests on any schedule	
5. Verification	The state of the s	
have and in any attached school design to the end associated.	detector and the second	
herein and in any attached schedules is true and complete. I acknowledge		
I certify under penalty of perjury under the laws of the State of Califor		
Date Signed March 28, 2011		

SCHEDULE A-1 Investments

CALIFORNIA FORM 7 FAIR POLITICAL PRACTICES COMMISSION

AMENDMENT

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

	NAME OF BUSINESS ENTITY		NAME OF BUSINESS ENTITY
	Lincoln Financial - LVIP Mondrian Intl. Value	1	Nationwide - International Fund
	GENERAL DESCRIPTION OF BUSINESS ACTIVITY		GENERAL DESCRIPTION OF BUSINESS ACTIVITY
	Retirement account	1	Retirement account
	FAIR MARKET VALUE		FAIR MARKET VALUE
	X \$2,000 - \$10,000		\$2,000 - \$10,000
	\$100,001 - \$1,000,000 Over \$1,000,000	1 1	
		1	\$100,001 - \$1,000,000 Over \$1,000,000
	NATURE OF INVESTMENT mutual fund	1 1	NATURE OF INVESTMENT
			NATURE OF INVESTMENT mutual fund Stock Other
	(Describe) Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)		(Describe) Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
	IF APPLICABLE, LIST DATE:	'	F APPLICABLE, LIST DATE:
	/ / 10 / / 10 ACQUIRED DISPOSED	_	/ / 10 / 10 ACQUIRED DISPOSED
▶	NAME OF BUSINESS ENTITY	D	NAME OF BUSINESS ENTITY
	Lincoln Financial - LVIP Janus Capital Apprectn.		Nationwide - Small Cap Fund
	GENERAL DESCRIPTION OF BUSINESS ACTIVITY		SENERAL DESCRIPTION OF BUSINESS ACTIVITY
	Retirement account	1	Retirement account
	FAIR MARKET VALUE	11 -	FAIR MARKET VALUE
	■ \$2,000 - \$10,000		X \$2,000 - \$10,000
	\$100,001 - \$1,000,000 Over \$1,000,000		\$100,001 - \$1,000,000 Over \$1,000,000
		'	
	NATURE OF INVESTMENT mutual fund Stock ☐ Other	,	NATURE OF INVESTMENT mutual fund
	(Describe)		(Describe)
	Partnership O Income Received of \$0 - \$499	1	Partnership O Income Received of \$0 - \$499
	○ Income Received of \$500 or More (Report on Schedule C)		O Income Received of \$500 or More (Report on Schedule C)
	IF APPLICABLE, LIST DATE:	1	F APPLICABLE, LIST DATE:
		1	/ / 10 · / / 10
	ACQUIRED DISPOSED	1 -	ACQUIRED DISPOSED
	NAME OF BUSINESS ENTITY		
•	Lincoln Financial - DWS Equity 500 VIP	COST TO	ification
GENERAL DESCRIPTION OF BUSINESS ACTIVITY		4	Name Todd L. Smith
	Retirement Account	Offic or Co	e, Agency CalPERS
	FAIR MARKET VALUE	State	ment Type 🗵 2010/2011 Annual 🗌 Assuming 🔲 Leaving
		State	Annual Candidate
	NATURE OF ABJUSTANCES	I have	e used all reasonable diligence in preparing this statement. I have
	NATURE OF INVESTMENT Mutual Fund Stock ⊠ Other		wed this statement and to the best of my knowledge the information
	Stock Other (Describe)		ined herein and in any attached schedules is true and complete.
	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)		tify under penalty of perjury under the laws of the State of
	IF APPLICABLE, LIST DATE:	Date	March 20, 2044
	ACQUIRED DISPOSED	1_	
	+	Signa	atu
_			
C	omments:		

SCHEDULE A-1 Investments

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

AMENDMENT

Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

► NAME OF BUSINESS	SENTITY	► NAME OF BUSINESS ENTITY
Nationwide - Mi	id Cap Fund	[1]
GENERAL DESCRIPT	TION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Retirement Acc	count	
FAIR MARKET VALUE	E	FAIR MARKET VALUE
\$2,000 - \$10,000		\$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$1,000		
\$100,001 - \$1,000	,,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTI	MENT mutual fund	NATURE OF INVESTMENT
☐ Stock 🔀 C	Otner(Describe)	Stock Other(Describe)
	come Received of \$0 - \$499	Partnership O Income Received of \$0 - \$499
O Inc	come Received of \$500 or More (Report on Schedule C)	○ Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST		IF APPLICABLE, LIST DATE:
		<u></u>
ACQUIRED	DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS	SENTITY	▶ NAME OF BUSINESS ENTITY
	arge Cap Index Fund	
Trationivido La	ingo oap maox i ana	
GENERAL DESCRIPT	TION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Retirement acco	ount	
FAIR MARKET VALUE		FAIR MARKET VALUE
X \$2,000 - \$10,000	\$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$1,000	0,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTM	MENT mutual fund	NATURE OF INVESTMENT
Stock 🗶 C	MENT mutual fund	☐ Stock ☐ Other
□ Bortoonbin Ola	(Describe)	(Describe)
	come Received of \$0 - \$499 come Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IE ADDUCADLE LICT	DATE.	IE ADDITION DE LIOT DATE
IF APPLICABLE, LIST	DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED	DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS	ENTITY	Verification
		Print Name Todd L. Smith
GENERAL DESCRIPT	TION OF BUSINESS ACTIVITY	
		Office, Agency CalPERS
FAIR MARKET VALUE	<u> </u>	
\$2,000 - \$10,000 \$10,001 - \$100,000		Statement Type 2010/2011 Annual Assuming Leaving
\$100,001 - \$1,000,	,000 Over \$1,000,000	Annual Candidate
		I have used all reasonable diligence in preparing this statement. I have
NATURE OF INVESTM		reviewed this statement and to the best of my knowledge the information
☐ Stock ☐ O	Other(Describe)	contained herein and in any attached schedules is true and complete.
☐ Partnership ○ Inc	come Received of \$0 - \$499	
	come Received of \$500 or More (Report on Schedule C)	I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.
IF APPLICABLE, LIST DATE:		Date Signe
/ / 10	/ / 10	
ACQUIRED	DISPOSED	
		Signature .

Comments: _